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	FIL DIC DATE	<u> </u>	FIRST NAMED INVENTOR	TAT	ORNEY DOCKET NO.	CONFIRMATION NO.
APPLICATION NO.	FILING DATE				128212	3247
10/593,979 09/22/2006 Satoshi Aoyama 128212 3247 FITLE OF INVENTION: HYDROGEN PERMEABLE MEMBRANE, FUEL CELL AND HYDROGEN EXTRACTING APPARATUS EQUIPPED WITH FITHE HYDROGEN PERMEABLE MEMBRANE, AND METHOD OF MANUFACTURING THE HYDROGEN PERMEABLE MEMBRANE						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/01/2010
EXAMINER		ART UNIT	CLASS-SUBCLASS]		
GREENE, JASON M		1797	096-011000			
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
(1) Toyota Jidosha Kabushiki Kaisha (1) Toyota, Japan						
(2) Sumitomo Electric Industries, LTD (2) Osaka, Japan Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government						
4a. The following fee(s) are submitted: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			 ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 150461 (enclose an extra copy of this form). 			
5. Change in Entity Sta	tus (from status indicate	ed above)	b. Applicant is no lo	nger claiming SMALL.	ENTITY status. See 37 0	CFR 1.27(g)(2).
NOTE The Laws France	as SMALL ENTITY stated Publication Fee (if rec	wired) will not be accente	ed from anyone other than	the applicant; a register	ed attorney or agent; or	the assignee or other party in
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